PTO/SB/17 (07-07)

Fees Paid (\$)

\$3200.00

Under the Feperwork Reduction	on Act of 199	5 no persons are required t	U.S. to respond to a co	Patent and Tra	ademark Office; U.S. mation unless it disp	DEPARTMENT OF COMMERCE lays a valid OMB control number				
				Complete if Known						
Fees Devant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		8). Application		10/623916						
FEE TRANSMITTAL		Filing Date	e	July 21, 2003	ıly 21, 2003					
For	r FY 2	.007	First Nam	ed Inventor	Gerd Binnig	erd Binnig				
Applicant claims small e		- C 27 CED:4 27	Examiner	Name	Horace Flourno	ov				
		•	Art Unit		2189	.,				
TOTAL AMOUNT OF PAYM	MENT (\$	3200.00	Attorney D	Jocket No.	CH920000082U	JS1				
METHOD OF PAYMENT	METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):										
Deposit Account De	Deposit Account Deposit Account Number: 09-0441 Deposit Account Name: Int'l Business Machines,									
	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) i						4 f 4k - 60k - 8a -				
		e(s) or underpayments of	"			except for the filing fee				
under 37 CFR	1.16 and 1	17	النا ٠٠	Credit any ov						
WARNING: Information on this information and authorization of	orm may be on PTO-2038	acome public. Crean cara : 3.	information sho	uld not be inc	luded on this form.	Provide credit card				
FEE CALCULATION										
1. BASIC FILING, SEAR			s							
	FILING		ARCH FEES		MINATION FEES	3				
Application Type	Fee (\$)	Fee (\$) Fee	Small Ent (\$) Fee (\$)		Small Entity (\$) Fee (\$)	Fees Paid (\$)				
Utility	300	150 500		200						
Design	200	100 100	0 50	130						
Plant	200	100 300	0 150	160						
Reissue	300	150 500	0 250	600	0 300					
Provisional	200	100 0	0 0	C						
2. EXCESS CLAIM FEES	s					Small Entity				
Fee Description Each claim over 20 (in	oluding R	Poissues			Fee (\$)	Fee (\$)				
Each independent clair	m over 3 ((including Reissues)			50 200	25 100				
Multiple dependent cla		morading romana			200 360	180				
	Tatal Claims			Paid (\$)		100 Dependent Claims				
- 20 or HP =		_ x			Fee (\$)	Fee Paid (\$)				
HP = highest number of total cl Indep. Claims			m-1 ± 10\							
			ee Paid (\$)			 				
HP = highest number of independent claims paid for, if greater than 3.										
3. APPLICATION SIZE FI	drawings e	exceed 100 sheets of p	paper (excludi	ing electron	ically filed sequ	ence or computer				
usungs under 37 CFF	K 1.52(e)),), the application size f	fee due is \$25	50 (\$125 for	r small entity) fo	or each additional 50				
sheets or traction the	reof. See Extra Shee	35 U.S.C. 41(a)(1)(G	3) and 37 CFR ach additional	R 1.16(s).		e (\$) Fee Paid (\$)				
- 100 =		/50 =		to a whole pu		e (a) Fee Faiu (a)				

SUBMITTED BY				_
Signature	the brush	Registration No. (Attorney/Agent) 25,585	Telephone 408 324-0716	
Name (Print/Type	Richard M. Goldman		Date August 13, 2007	

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Issue and Publication (\$1700), Petition to Revive (\$1500)

4. OTHER FEE(S)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.